

BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE:
YOU MUST
COMPLETE THE
FOLLOWING

P.O. Box 747 • Falls Church, Virginia 22040-0747
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

POLY-HETEROCYCLIC COMPOUNDS AND THEIR USE AS METABOTROPIC GLUTAMATE RECEPTOR ANTAGONISTS

the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:

File in Appropriate Information - The specification was filed on _____ as United States Application Number _____;

and amended on _____ (if applicable) and/or

For Use Without Specification Attached: the specification was filed on 02/17/2005 as PCT International Application Number PCT/US2005/005216; and was amended on 08/08/2005 (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Priority Claimed				
(Number)	(Country)	(Month/Day/Year Filed)	Yes	No

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.

Insert Provisional Application(s): (if any) 60/548,292 February 18, 2004
(Application Number) (Filing Date)

(Application Number) (Filing Date)

All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:

Insert Requested Information (if appropriate) Country Application Number Date of Filing (Month/Day/Year)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

Insert Prior U.S. Application(s): (if any) (Application Number) (Filing Date) (Status - patented, pending, abandoned)
(Application Number) (Filing Date) (Status - patented, pending, abandoned)

I hereby appoint the practitioners at CUSTOMER NO. 54080 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 54080; (BIRCH, STEWART, KOLASCH & BIRCH, LLP)
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE:
YOU MUST
COMPLETE
THE
FOLLOWING:
↓

Full Name of First
or Sole Inventor:
Exact Name of
Inventor
Insert Date This
Document is Signed

Insert Residence

Insert Post Office
Address

Full Name of Second
Inventor, if any;
see above

Full Name of Third
Inventor, if any;
see above

Full Name of Fourth
Inventor, if any;
see above

Full Name of Fifth
Inventor, if any;
see above

Full Name of Sixth
Inventor, if any;
see above

GIVEN NAME/FAMILY NAME Jaisj ARORA	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Cambridge, Canada		CITIZENSHIP Canada
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8; CANADA		
GIVEN NAME/FAMILY NAME Louise EDWARDS	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Toronto, Canada		CITIZENSHIP Canada
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8; CANADA		
GIVEN NAME/FAMILY NAME Methvin ISAAC	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Toronto, Canada		CITIZENSHIP Canada
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8; CANADA		
GIVEN NAME/FAMILY NAME Annika KERS	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Södertälje, Sweden		CITIZENSHIP Sweden
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o AstraZeneca R&D Södertälje; SE-151 85 Södertälje; SWEDEN		
GIVEN NAME/FAMILY NAME Karin STAAF	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Södertälje, Sweden		CITIZENSHIP Sweden
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o AstraZeneca R&D Södertälje; SE-151 85 Södertälje; SWEDEN		
GIVEN NAME/FAMILY NAME Abdelmalik SLASSI	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Toronto, Canada		CITIZENSHIP Canada
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8; CANADA		

*DATE OF SIGNATURE

Full Name of Seventh
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME Tomislav STEFANAC	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Toronto, Canada	CITIZENSHIP Canada	
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp.; 101 College Street, 8th Floor; Toronto, Ontario M5G 1L8; CANADA		

Full Name of Eighth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME David WENSBØ	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Södertälje, Sweden	CITIZENSHIP Sweden	
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o AstraZeneca R&D Södertälje; SE-151 85 Södertälje; SWEDEN		

Full Name of Ninth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME Tao XIN	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Woodbridge, Canada	CITIZENSHIP Canada	
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp.; 101 College Street, 8th Floor; Toronto, Ontario M5G 1L8; CANADA		

Full Name of Tenth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME Björn HOLM	INVENTOR'S SIGNATURE 	DATE* 2004-03-20
Residence (City, State & Country) Mölnadal, Sweden	CITIZENSHIP Sweden	
MAILING ADDRESS (Complete Street Address including City, State & Country) AstraZeneca R & D Mölnadal; S-431 83 Mölnadal; SWEDEN		

Full Name of Eleventh
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	
MAILING ADDRESS (Complete Street Address including City, State & Country)		

Full Name of Twelfth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	
MAILING ADDRESS (Complete Street Address including City, State & Country)		

Full Name of Thirteenth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	
MAILING ADDRESS (Complete Street Address including City, State & Country)		

*DATE OF SIGNATURE

BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE:
YOU MUST
COMPLETE THE
FOLLOWING

P.O. Box 747 • Falls Church, Virginia 22040-0747
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FOLY-HETEROCYCLIC COMPOUNDS AND THEIR USE AS METABOTROPIC GLUTAMATE RECEPTOR ANTAGONISTS

the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:

Fill in Appropriate Information -
The specification was filed on _____ as United States Application Number _____;

For Use Without Specification Attached:
and amended on _____ (if applicable) and/or
the specification was filed on 02/17/2005 as PCT International Application Number PCT/US2005/005216;
and was amended on 08/08/2005 (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.

Insert Provisional Application(s): (if any)	60/545,292	February 18, 2004
	(Application Number)	(Filing Date)

All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:

Insert Requested Information (if appropriate)	Country	Application Number	Date of Filing (Month/Day/Year)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

Insert Prior U.S. Application(s): (if any)	(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)
	(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)

I hereby appoint the practitioners at CUSTOMER NO. 54080 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary.

Send Correspondence to:

CUSTOMER NO. 54080; (BIRCH, STEWART, KOLASCH & BIRCH, LLP)
Telephone: (703) 205-8000 * Facsimile: (703) 205-8050

PLEASE NOTE:
YOU MUST
COMPLETE
THE
FOLLOWING:
↓

Full Name of First or Sole Inventor: Inventor Name of Inventor Inventor Date This Document is Signed	GIVEN NAME/FAMILY NAME Jalaj ARORA	INVENTOR'S SIGNATURE	DATE*
Insert Residence	Residence (City, State & Country) Cambridge, Canada		CITIZENSHIP Canada
Insert Post Office Address	MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8, CANADA		
Full Name of Second Inventor, if any; see above	GIVEN NAME/FAMILY NAME Louise EDWARDS	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country) Toronto, Canada		CITIZENSHIP Canada
	MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8, CANADA		
Full Name of Third Inventor, if any; see above	GIVEN NAME/FAMILY NAME Mehvjin ISAAC	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country) Toronto, Canada		CITIZENSHIP Canada
	MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8, CANADA		
Full Name of Fourth Inventor, if any; see above	GIVEN NAME/FAMILY NAME Annika KERS	INVENTOR'S SIGNATURE <i>Annika Kers</i>	DATE* 060929
	Residence (City, State & Country) Södertälje, Sweden		CITIZENSHIP Sweden
	MAILING ADDRESS (Complete Street Address including City, State & Country) AstraZeneca R&D Södertälje, SE-151 85 Södertälje, Sweden		
Full Name of Fifth Inventor, if any; see above	GIVEN NAME/FAMILY NAME Karin STAAP	INVENTOR'S SIGNATURE <i>Karin Staap</i>	DATE* 060904
	Residence (City, State & Country) Södertälje, Sweden		CITIZENSHIP Sweden
	MAILING ADDRESS (Complete Street Address including City, State & Country) AstraZeneca R&D Södertälje, SE-151 85 Södertälje, Sweden		
Full Name of Sixth Inventor, if any; see above	GIVEN NAME/FAMILY NAME Abdelmalik SLASSI	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country) Toronto, Canada		CITIZENSHIP Canada
	MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8, CANADA		

*DATE OF SIGNATURE

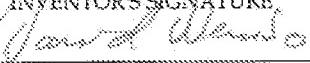
Full Name of Seventh
Inventor, if any;
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Tomislav STEFANAC		

Residence (City, State & Country)	CITIZENSHIP
Toronto, Canada	Canada

MAILING ADDRESS (Complete Street Address including City, State & Country)		
c/o NPS Allelix Corp.; 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8; CANADA		

Full Name of Eighth
Inventor, if any;
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
David WENSBO		Aug 26th 2006

Residence (City, State & Country)	CITIZENSHIP
Södertälje, Sweden	Sweden

MAILING ADDRESS (Complete Street Address including City, State & Country)		
AstraZeneca R&D Södertälje, SE-151 85 Södertälje, Sweden		

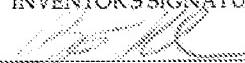
Full Name of Ninth
Inventor, if any;
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Tao XIN		

Residence (City, State & Country)	CITIZENSHIP
Woodbridge, Canada	Canada

MAILING ADDRESS (Complete Street Address including City, State & Country)		
c/o NPS Allelix Corp.; 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8; CANADA		

Full Name of Tenth
Inventor, if any;
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Björn HOLM		

Residence (City, State & Country)	CITIZENSHIP
Mölndal, Sweden	Sweden

MAILING ADDRESS (Complete Street Address including City, State & Country)		
AstraZeneca R & D Mölndal; SE-431 83 Mölndal; SWEDEN		

Full Name of Eleventh
Inventor, if any;
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*

Residence (City, State & Country)	CITIZENSHIP

MAILING ADDRESS (Complete Street Address including City, State & Country)		
---	--	--

Full Name of Twelfth
Inventor, if any;
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*

Residence (City, State & Country)	CITIZENSHIP

MAILING ADDRESS (Complete Street Address including City, State & Country)		
---	--	--

Full Name of Thirteenth
Inventor, if any;
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*

Residence (City, State & Country)	CITIZENSHIP

MAILING ADDRESS (Complete Street Address including City, State & Country)		
---	--	--

*DATE OF SIGNATURE

BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE
YOU MUST
COMPLETE THE
FOLLOWING

P.O. Box 747 • Falls Church, Virginia 22040-0747
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verify believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:
POLY-HETEROCYCLIC COMPOUNDS AND THEIR USE AS METABOTROPIC GLUTAMATE RECEPTOR ANTAGONISTS

Fill in Appropriate Information -
the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:

The specification was filed on _____ as United States Application Number _____ ;
and amended on _____ (if applicable) and/or

For Use Without Specification Attached:
the specification was filed on 02/17/2005 as PCT International Application Number PCT/US2005/005236 ;
and was amended on 08/08/2005 (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)			Priority Claimed	
(Number)	(Country)	(Month/Day/Year Filed)	Yes	No
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.

Insert Provisional Application(s):
(if any)

(Application Number) 60/545,292 February 18, 2004
(Filing Date)

All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:

Insert Requested Information
(if appropriate)

Country _____ Application Number _____ Date of Filing (Month/Day/Year) _____

I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

Insert Prior U.S. Application(s):
(if any)

(Application Number) _____ _____ (Status - patented, pending, abandoned)
(Filing Date) _____
(Application Number) _____ _____ (Status - patented, pending, abandoned)
(Filing Date) _____

I hereby appoint the practitioners at CUSTOMER NO. 54080 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 54080; (BIRCH, STEWART, KOLASCH & BIRCH, LLP)
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

**PLEASE NOTE:
YOU MUST
COMPLETE
THE
FOLLOWING:**

↓

Full Name of First
or Sole Inventor:
Inventor Name if
Inventor
Inventor Date This
Document is Signed

Inventor Residence
Inventor Citizenship

Inventor Post Office
Address

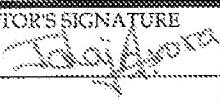
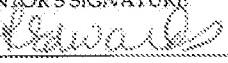
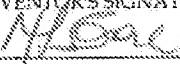
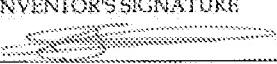
Full Name of Second
Inventor, if any:
see above

Full Name of Third
Inventor, if any:
see above

Full Name of Fourth
Inventor, if any:
see above

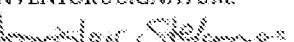
Full Name of Fifth
Inventor, if any:
see above

Full Name of Sixth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Jalaj ARORA		Sep 07/08
Residence (City, State & Country) Cambridge, Canada	CITIZENSHIP Canada	
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8, CANADA		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Louise EDWARDS		Sep 7/08
Residence (City, State & Country) Toronto, Canada	CITIZENSHIP Canada	
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8, CANADA		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Methvin ISAAC		Sep 7/08
Residence (City, State & Country) Toronto, Canada	CITIZENSHIP Canada	
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8, CANADA		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Anniika KERS		
Residence (City, State & Country) Södertälje, Sweden	CITIZENSHIP Sweden	
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o AstraZeneca R&D Södertälje, SE-151 85 Södertälje, SWEDEN		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Karin STAAF		
Residence (City, State & Country) Södertälje, Sweden	CITIZENSHIP Sweden	
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o AstraZeneca R&D Södertälje, SE-151 85 Södertälje, SWEDEN		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Abdelmalik SLASSI		Sep 07/08
Residence (City, State & Country) Toronto, Canada	CITIZENSHIP Canada	
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o NPS Allelix Corp., 101 College Street, 8th Floor, Toronto, Ontario M5G 1L8, CANADA		

*DATE OF SIGNATURE

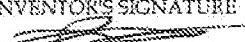
Full Name of Seventh Inventor, if any:
see above

GIVEN NAME/FAMILY NAME Tomislav STEFANAC	INVENTOR'S SIGNATURE 	DATE* Sept. 11, 2006
Residence (City, State & Country) Toronto, Canada	CITIZENSHIP Canada	

Full Name of Eighth Inventor, if any:
see above

GIVEN NAME/FAMILY NAME David WENSBO	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Södertälje, Sweden	CITIZENSHIP Sweden	

Full Name of Ninth Inventor, if any:
see above

GIVEN NAME/FAMILY NAME Tao XIN	INVENTOR'S SIGNATURE 	DATE* Sept. 7, 2006
Residence (City, State & Country) Woodbridge, Canada	CITIZENSHIP Canada	

Full Name of Tenth Inventor, if any:
see above

GIVEN NAME/FAMILY NAME Björn HOLM	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Mölndal, Sweden	CITIZENSHIP Sweden	

Full Name of Eleventh Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	

Full Name of Twelfth Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	

Full Name of Thirteenth Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	

*DATE OF SIGNATURE